

Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of Copies of CDs::
Sequence Submission?:: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0
Title:: TOOLING FOR MOLDING WITH KEYS
PARTICULARLY FOR THE PRODUCTION
OF AIR INTAKES WITHOUT CLIPS
Attorney Docket Number:: 0515-1059
Request for Early No
Publication?::
Request for Non-Publication?:: No
Suggested Drawing Figure:: 10
Total Drawing Sheets:: 9
Small Entity?:: No
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Gov't Agency::
Contract or Grant Numbers::
Secrecy Order in Parent No
Appl.?::

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: MICHEL
Middle Name::
Family Name:: BUGE
City of Residence:: SAINT SEBASTIEN SUR LOIRE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 10 RUE DU CLOS DAVY

City of Mailing Address:: SAINT SEBASTIEN SUR LOIRE
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-44230

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: JACQUES
Middle Name::
Family Name:: LALANE
City of Residence:: SAINT ORENS
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 14 ALLEE DES ROSSIGNOLS

City of Mailing Address:: SAINT ORENS
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-31650

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: ALAIN
Middle Name::
Family Name:: PORTE
City of Residence:: COLOMIERS
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 8 ALLEE DE BELLE-LLE

City of Mailing Address:: COLOMIERS
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-31770

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name:: ERIC
Middle Name::
Family Name:: RAMBAUD
City of Residence:: LES SORINIERES
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 11 RUE DE LA POSTE

City of Mailing Address:: LES SORINIERES
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-44840

Correspondence Information

Correspondence Customer 000466
Number::

Representative Information

| | |
|-------------------------|--------|
| Representative Customer | 000466 |
| Number:: | |

Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|---------------|-------------------|----------------------|----------------------|
| | | | |
| | | | |

Foreign Priority Information

| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
|-----------|----------------------|---------------|--------------------|
| FRANCE | 02 08014 | 6/27/02 | Yes |
| | | | |

Assignment Information

Assignee Name::
Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::